Date

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## PTO/SB/21 (08-00) Approved for use through 10/31/2002. OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT, OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number TRANSMITTAL Filing Date FORM** 16.M.FLEISCHNER First Named Inventor (to be used for all correspondence after initial filing) Group Art Unit Chris.Robin TA **Examiner Name** Total Number of Pages in This Submission Attorney Docket Number **ENCLOSURES** (check all that apply) After Allowance Communication Assignment Papers Fee Transmittal Form (for an Application) to Group Appeal Communication to Board Fee Attached Drawing(s) of Appeals and Interferences Licensing-related Papers Appeal Communication to Group Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition After Final Proprietary Information Petition to Convert to a Affidavits/declaration(s) Provisional Application Status Letter Power of Attorney, Revocation Change of Correspondence Other Enclosure(s) (please Extension of Time Request Address identify below): Terminal Disclaimer **Express Abandonment Request** Request for Refund Information Disclosure Statement CD, Number of CD(s). Certified Copy of Priority Document(s) Remarks Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Pharmaceutical Patent Attorneys, LLC Firm 55 Madison Avenue, 4th floor, Morristown NJ 07960-7397 USA Individual name Signature

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Effective of 2/08/2004. Fees pursuant to the Appropriations Act, 2005 (H.R. 4818).			Complete if Known					
			Application Number 10/693,442					
FEE TRANSMITTAL			Filing Date		24 Oct.	2003		
	For FY	2005		First Named I	nventor /	11. M. Flai	schner	
Applicant of	laime small entity s	tatus See 37	CER 1.27	Examiner Nar	ne (	C.R. TATE		
Applicant claims small entity status. See 37 CFR 1.27			Art Unit		655			
TOTAL AMOUNT OF PAYMENT (\$) 1800			Attorney Dock	ket No.	<u>Frim Spa</u>	/		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: Deposit Account Name:								
For the a	bove-identified dep	osit account, t	he Director is her	eby authorized	to: (check all	l that apply)		
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FEE CALCUL	ATION					<u></u>		
1. BASIC FILI	NG, SEARCH, A							
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<u>Application</u>	Type Fee		Fee (\$		Fee (\$)		Fees Paid (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissuc	300	150	500	250	600	300		
Provisional	200	100	0	, 0	()	0		
2. EXCESS C						F (#)	Small Entity	
Fee Descript	<u>ion</u> over 20 (includi:	na Reissues)				<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25	
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HP = highest no Indep. Claims	mber of total claims p			Paid (\$)				
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HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g.	, late filing surch	arge): Inf	o.Disch.	Stmt.			180=	
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ignature /www.pohl/ Registration No. 35325 Telephone 973 984-0076								
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This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.